

PART B—ISSUE FEE TRANSMITTAL

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DEC 18 2001

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000757 WM21/0924
BRINKS HOFER GILSON & LIONE
P.O. BOX 10395
CHICAGO IL 60610

00757
PATENT TRADEMARK OFFICE

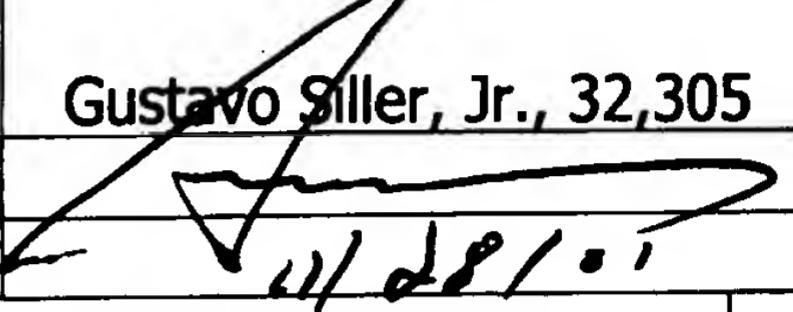
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Certificate of Mailing

I hereby certify that this Issue Fee Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Box Issue Fee address above on the date indicated below.

Gustavo Siller, Jr., 32,305

(Depositor's name)



(Signature)



(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
09/456,151	12/07/99	017	RENNER, C	2652 09/24/01
First Named Applicant	SATO, 35 USC 154(b) term ext. = 0 Days.			

TITLE OF INVENTION SUBSTRATE HAVING MAGNETORESISTIVE ELEMENTS AND MONITOR ELEMENT CAPABLE OF PREVENTING A SHORT CIRCUIT

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 9281-3489	360-316.000	M301	UTILITY	NU	\$1240.00	12/24/01
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Use of PTO form(s) and Customer Number are recommended, but not required. <input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. <input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.						2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 <u>BRINKS HOFER GILSON & LIONE</u> 2 _____ 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ALPS ELECTRIC CO., LTD.

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Tokyo, Japan

Please check the appropriate assignee category indicated below (will not be printed on the patent)

individual corporation or other private group entity government

4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee
 Advance Order - # of Copies **10**

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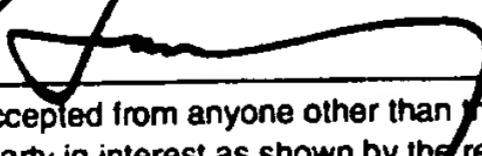
DEPOSIT ACCOUNT NUMBER **23-1925**
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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)



Gustavo Siller, Jr.
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

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12/19/2001 SDENB0B2 00000019 03456151

01 FC:142
02 FL:561

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